

Illinois Department of Revenue
RPU-13-X Amended Electricity Excise Tax Return

REV 1
E S ____/____/____
NS DP CA

Step 1: Identify your business

Station 053

Do not write above this line.

1 Illinois Business Tax number (IBT no.): _____
2 Federal Employer Identification number (FEIN): _____
3 License no.: **E** - _____
4 Taxpayer name: _____
5 Business name: _____
6 Business address: _____
Number and street
City State ZIP

7 Check the appropriate box and complete the tax period for which you are filing this return:
☐ **Month** of _____.
☐ **Quarter** ending _____.
☐ **Year** _____.
8 ☐ Check here if your address has changed.
9 Is this a final return? ☐ yes ☐ no
"Final" indicates you will no longer conduct business
If "yes," complete the following: My business was
☐ **discontinued** _____.
☐ **sold**: _____.

Step 2: Receipts subject to tax - Figures as they should have been reported

10 Gross receipts from sales of electricity taxed on a gross-receipts basis. **10** _____
11 Deductions (only tax-exempt receipts you included on Line 10.)
a Receipts from interstate commerce **11a** _____
b Receipts from rebillable service (sale for resale) **11b** _____
c Other. Explain: _____ **11c** _____
12 Add Lines 11a, 11b, and 11c. This amount is your total deduction. **12** _____
13 Subtract Line 12 from Line 10. This amount is your receipts subject to tax. **13** _____

Step 3: Kilowatt-hours subject to tax - Figures as they should have been reported

14 Total kilowatt-hours taxed on a per-kilowatt-hour basis. **14** _____
15 Deductions (only tax-exempt kilowatt-hours you included on Line 14.)
a Kilowatt-hours sold or distributed in interstate commerce **15a** _____
b Kilowatt-hours to be rebilled (sale for resale) **15b** _____
c Other. Explain: _____ **15c** _____
16 Add Lines 15a, 15b, and 15c. This amount is your total deduction. **16** _____
17 Subtract Line 16 from Line 14. This amount is your kilowatt-hours subject to tax. **17** _____

Step 4: Tax due - Figures as they should have been reported

18 Multiply Line 13 by 5% (.05). This is the tax on your receipts. **18** _____
19 Multiply Line 17 by .32¢ (.0032) per kilowatt-hour. This is the tax on your kilowatt-hours. **19** _____
20 Tax due from Worksheet A, Line o, or Worksheet B, Line d, if required to complete either worksheet. **20** _____
21 Add Lines 18, 19, and 20. This is your total Electricity Excise Tax due. **21** _____
22 If you pay on a quarter-monthly basis, write the amount you paid in estimated payments. If not, write "0." **22** _____
23 Total qualified solid waste energy tax credit you wish to apply and the total tax paid to another state for which you are taking credit. (See instructions.) **23** _____
24 Add Lines 22 and 23. This is the tax you have already paid. **24** _____
25 If Line 24 is greater than Line 21, subtract Line 21 from Line 24. This amount is your overpayment. **25** _____
26 If Line 24 is less than Line 21, subtract Line 24 from Line 21. This amount is your tax due. **26** _____
27 Total credit you wish to apply from a credit memorandum. **27** _____
28 Subtract Line 27 from Line 26. This is your net tax due. **28** _____
29 Total amount that you have paid for this reporting period. **29** _____
30 If Line 29 is **greater than** Line 28, figure your overpayment by subtracting Line 28 from Line 29. **30** _____
31 If Line 29 is **less than** Line 28, figure your underpayment by subtracting Line 29 from Line 28. **31** _____
Make your check payable to "Illinois Department of Revenue."

Step 5: Check the reason you are filing this amended return

- ☐ I received a Notice of Possible Overpayment or made a computation error that resulted in an overpayment of tax.
• If you checked this box, did you collect the overpaid tax from your customer? ☐ yes ☐ no
• If you checked "yes," did you unconditionally refund the overpaid tax? ☐ yes ☐ no
☐ I made a computation error that resulted in underpayment of tax.
☐ I made an error on a schedule or attachment.
☐ I should have taken a deduction for _____
☐ The original IBT no. was incorrect. The incorrect IBT no. is _____.
☐ The original reporting period was incorrect. The incorrect reporting period is _____.
☐ Other. Please explain: _____

Step 6: Sign below

Under penalties of perjury, I state that I have examined this return and, to the best of my knowledge, it is true, correct, and complete.

Taxpayer's signature

Date

Telephone number

Preparer's signature

Date

Telephone number

